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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  <small>(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))</small>	Attorney Docket No.	HUM00-23
	First Inventor or Application Identifier	Tim Keith
	Title	Novel Human Genes Relating to Respiratory Diseases and Obesity
	Express Mail Label No.	EL442001935US

<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>		<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	
1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small>		5. <input type="checkbox"/> Microfiche Computer Program (Appendix)	
2. <input checked="" type="checkbox"/> Specification <small>(Total Pages 94)</small> <small>(preferred arrangement set forth below)</small> - Descriptive title of the invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the invention - Brief Summary of the invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure		6. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> a. <input checked="" type="checkbox"/> Computer Readable Copy b. <input checked="" type="checkbox"/> Paper Copy (identical to computer copy) c. <input checked="" type="checkbox"/> Statement verifying identity of above copies	
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <small>(Total Sheets 24)</small>		<b>ACCOMPANYING APPLICATION PARTS</b>	
4. Oath or Declaration <small>(Total Pages)</small> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) <small>(for continuation/divisional with Box 16 completed)</small> c. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).		7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small> 9. <input type="checkbox"/> English Translation Document (if applicable) 10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 11. <input type="checkbox"/> Preliminary Amendment 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (2) <small>(Should be specifically itemized)</small> * Small Entity <input type="checkbox"/> Statement filed in prior application, Status still proper and desired 13. <input type="checkbox"/> Statement(s) <small>(PTO/SB/09-12)</small> 14. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> 15. <input type="checkbox"/> Other:	
16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: _____ Prior application information: Examiner _____ Group / Art Unit: _____ <b>For CONTINUATION or DIVISIONAL APPS only:</b> The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the continuing or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when the prior application is not inadvertently omitted from the submitted application parts.			
<b>17. CORRESPONDENCE ADDRESS</b> <input checked="" type="checkbox"/> Customer Number or Bar Code Label <b>23856</b> or <input type="checkbox"/> Correspondence address below <small>(Insert Customer No. or Attach bar code label here)</small>			
Name <b>Nina L. Pearlmutter, Esq.</b> <b>Genome Therapeutics Corporation</b> Address <b>100 Beaver Street</b> City <b>Waltham</b> State <b>MA</b> Zip Code <b>02453</b> Country <b>USA</b> Telephone <b>781-398-2300</b> Fax <b>781-398-2607</b>			

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Signature	<i>[Signature]</i>	Date	7/28/00

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